

ISSUE SLIP STAFF AREA 4 (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SC		1-14-99
O.I.P.E. CLASSIFIER			1/20/99
FORMALITY REVIEW	AL/AK	70276/70276	2-3-99 3/24/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 (Through numeral) Canceled A Appeal
 - Restricted O Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here.

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